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ABSTRACT

Designed to help trainee child caregivers working in military care centers make decisions relating to real problems, this staff development module examines how caregivers can create an optimal environment for children. Discussions focus on respecting children's individual differences, being aware of feelings and personal style in dealing with children, supporting children's play, protecting children's safety, and helping children develop expectancies and familiarity with routine activities at the center. Following each discussion is a set of multiple-choice skill-building exercises based on situations caregivers are likely to encounter. These exercises describe a problematic situation, list alternate responses which the caregiver may select, and provide feedback on the caregiver's choice. A "postview" of new situations and alternate ways of handling them is provided at the end of the module. (RH)

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Department of Defense

The "Caring" Role In A Child Care Center

Staff Development Series

Military Child Care Project

Part III
Relating To Children

April 1982

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FOREWORD

This series of manuals for Child Care Givers on DoD Installations is issued under the authority of DoD Instruction 6060.1, "Training Manuals for Child Care Givers on DoD Installations," January 19, 1981. Its purpose is to provide child care givers with training materials that include the latest techniques and procedures for the safe care and guiding development of children entrusted to their care.

This series of manuals, DoD 6060.1-M-1 through DoD 6060.1-M-17, was developed under the auspices of the Department of Health and Human Services by the Department of Army, in cooperation with the Navy, Air Force, and Marine Corps.

The provisions of this series of manuals apply to the Office of the Secretary of Defense, the Military Departments, and the Defense Agencies (hereafter referred to as DoD Components) whose heads shall ensure that the manuals are distributed or otherwise made available to all child care givers on DoD installations and that these materials are used in regional and inter-Service workshops, seminars, and training sessions.

This series of manuals is effective immediately.

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R. Dean Tice
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The "Caring" Role In A Child Care Center

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Part III
Relating To Children

PART III
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INTRODUCTION

WELCOME to the first in a series of staff development modules written for the "caregiver" or "teacher" in a military child care center. We think the hints and ideas provided in these modules will help you on your job. This first module, The Caring Role In A Child Care Center, will tell you what role you will play in providing the best possible care for children and in cooperating with their parents. You now are reading Part III of the module, Relating To Children.

Let us introduce you to a new kind of experience, learning through self-paced instruction. This means you will be able to work on your own, by yourself, and at your own pace. In each section a small amount of discussion about important ideas will be provided, followed by some real situations that take place in child care centers. These situations have really happened and come from the experiences of our own caregivers who tell us that new caregivers are very likely to find these situations hard to handle. In other words, the experiences you will find in this module and the other modules are very much like the ones you will run into on your job.

At the end of this part of the module, there are some situations with choices of ways to handle them. These situations are similar to the ones in Part I of the module. It will be interesting and exciting for you to check yourself on what you have learned by comparing the answers you selected before you read Part I of the module with the ones you selected at the end of the module.

Although the situations you are about to read do not in any way cover ALL problems that you may have in a child care center, the more common or frustrating problems you may face are presented.

This module is designed to help you learn to make decisions relating to real problems. The situations have been selected from actual experiences of caregivers in our child care center.

We want to stress that the solutions we present are not the only possible answers to the situations. There are possibly as many "right" answers as there are caregivers. Hopefully, the situations

and solutions we present will not only increase your knowledge of your caring role in a child care center but also will stimulate your thinking about yourself, decisions which you will make in your job, and the possible outcomes of your actions.

RESPECT A CHILD'S INDIVIDUAL DIFFERENCES

Help Children Recognize And Develop Their Uniqueness

No two children are alike. No two adults are alike. No two people who have some things in common - black hair, blue eyes, a learning disability - necessarily feel the same about themselves. However, as human beings, we all share a need for love, attention and nourishment.

Each child is a unique individual with abilities, ambitions, thoughts and desires that belong to no one else. Child care programs should allow the differences in children to grow.

Children differ in many ways: physical growth, appearance, health, interests, ethnic origin, family size and family social status, to name only a few. Your goal, as a caregiver, should be to recognize these differences and help each child develop her or his unique potentials: not do away with the differences and create sameness among the children.

Individual differences are evident in many areas. For instance, all children don't like the same foods. Despite the nutritional value of milk, some children may be allergic to it and will become ill if they drink it. Some children like to be hugged and cuddled, while others feel smothered by this. Some children are well-coordinated at an early age, while others are clumsy at the same age.

Expect Children To Respond To You In Different Ways

Just as children are not alike in other areas, they also respond differently to child rearing methods related to eating, sleeping, affection or play. Something that works with one child may not work with another.

Some children are shy and prefer to spend time alone, while others are very interested in other children. Forcing a child into relationships or activities before she is ready may slow down development rather than encourage it.

Don't Expect Children Of The Same Age Always To Do The Same Things

The age of a child is not the best way of knowing what to expect from him. Social growth, emotional growth, intellectual growth and physical growth are parts of the development of the whole child. Development in all areas does not happen at the same speed. Also, development never is in a straight line; instead, the

pattern of development is more a back and forth movement - reaching to grow, then backing up to be comfortable, then reaching to grow again.

Provide A Variety Of Ways For Children To Feel Successful

You will find that children don't have any problems choosing experiences appropriate for themselves. The problem comes if there are not enough appropriate experiences from which to choose.

The idea of self-concept - how children feel about themselves - is related closely to the idea of individual differences. It is the parents' and caregiver's responsibility to assist children to accept their differences and to be happy with themselves. This is why good child care provides children with opportunities to have experiences in a wide variety of areas - physical activities, expressive arts and music, games and social activities. In this way, a child whose coordination is not developed and who lacks skills in physical activities, for example, can feel success in another area - perhaps in singing or painting. Caregivers who are sensitive to individual differences will try to provide a variety of opportunities for children to succeed in many ways every day.

Children need to feel successful in order to build self-confidence and a willingness to try new and more difficult things.

Create Respect For Cultural And Racial Differences

Providing a variety of opportunities for children does not necessarily mean providing the same opportunities for all children. Focusing all day care programs toward middle-class values and habits violates the individuality of children from different traditions. It is a caregiver's responsibility to assist children to feel neither inferior nor superior because of their heritage, but to encourage them to be proud of their own culture and accepting and appreciative of others' cultures. Child care should provide an ideal setting for young children to learn to know and enjoy people who are of a different race, background, physical or mental ability, sex or age.

For example, programs should vary the kinds of foods that are served, the ways food is eaten, the types of music and musical instruments presented, the types of books that are read, the holidays celebrated and the languages spoken in the center.

Be Aware That Disabled Or Handicapped Children Have The Same Needs As Other Children

You might ask youself if anything makes you disabled. If you wear glasses to correct your vision, you may be said to be disabled. The way parents and other people around disabled or handicapped children deal with the handicap sometimes determines how "handicapped" a person really is. In other words, there can be a difference between "being handicapped" and "having a handicap" - it can all depend on how well the person learns to deal with it. When an adult learns to think more about what she can do rather than what she can't, things more often go in a positive direction. If you emphasize and react to what a child with a disability can achieve, you will help that child on the road to greater self-confidence and independence - just as for any other child.

Overprotection, is never healthy for any child. It is most important to help disabled children help themselves, not just to do everything for them.

Children with disabilities have similar needs and feelings as other children. When any child comes to a child care center for the first time, it can be a strange and fearful occasion. There is no need to expect that a retarded child, for instance, because he is not totally aware of his world, will be less fearful.

You may wonder, at this point, how you will meet the exceptional needs of the special child and still provide the same good care for the other children in the center. There is no total solution, but as you spend more time with the children and become more comfortable with the child care setting and the other children, it is likely that this problem will fade into routine and the "differences" will provide a welcome break.

Don't Use Words That Will Hurt Feelings

DON'T SAY THIS:	SAY THIS:
BACKWARDS:	Mentally or emotionally disturbed.
CRIPPLE:	Physically disabled.
DEAF AND DUMB:	Hearing impaired, unable to speak, or retarded.
DEFORMED:	Physically handicapped.

DON'T SAY THIS:	SAY THIS:
DUMMY:	Slow learner or retarded.
FAT SLOB, FATSO:	Overweight.
FEEBLE MINDED:	Retarded, etc.
FOUR EYES:	Someone with glasses.
HAS THE FITS:	Seizures, such as with epilepsy.
FREAK:	Anyone who is different.
HUNCHBACK, HUNCH:	Curved back.
HYPER:	From Hyperactive.
IDIOT:	Retarded.
LIMPY, GIMPY:	Physically disabled.
MENTAL:	Mental or emotionally disabled.
MONGOLIAN IDIOT:	Down's Syndrome.
MOON FACE:	Down's Syndrome.
MORON:	Retarded or slow to learn.
NOT RIGHT:	Just say, "has a handicapping condition."
PSYCHO:	Mentally or emotionally disturbed.
SCHIZ:	Schizophrenic. Should not be used as slang.
SPAZ:	A child lacking coordination (muscle control) usually a child with cerebral palsy.
WATER HEAD OR WATER ON THE BRAIN:	Hydrocephalus.

BUILDING YOUR SKILLS
IN
SUPPORTING DIFFERENCES

. . . Some Often Asked
Questions
And
Situations To Explore

HOW DO YOU HANDLE DIFFICULT BEHAVIORS?

Children adjust to the same situation in different ways. For one thing, no situation means exactly the same thing to all children. Experiences will have different meanings for each child, depending upon past experiences and inborn differences. Being taken to a new place may mean pleasant possibilities to one child and disturbing possibilities to another. We know that the sum total of a child's experience usually is more important than any single experience. Therefore, it is desirable to have each experience contribute to making the child feel more secure and adequate. We need to recognize that behavior has meaning. For instance, whining, teasing, sulking, and bullying are not of themselves problems, but symptoms which tell us the child is either unhappy or ill.

Children who are forced into making adjustments for which they are not ready are less prepared for any further adjustment. The damage they suffer may be evident indirectly, as in greater dependence, increased irritability or a loss of creativity. You can, however, help children feel more secure by being aware of and helping them with their feelings.

WHAT WOULD YOU DO IF . . .

Jimmy, who is four and a half, comes to the center every day. He prides himself on knowing all the rules of the room. He often comes to tell you that someone is running in the room, not sharing, saying "bad" words, etc. The children are beginning to stay away from Jimmy and often get angry with him. What would you say to Jimmy to stop the tattling?

A. "Jimmy, I'll watch the other children and take care of them just as I do you. I would like you to play, and if someone does something wrong, you may tell them the rule if I don't see what's happening; but don't come to me, please."

B. "You take care of yourself, Jimmy, and let me take care of the children who break the rules. Nobody likes a tattle-tale."

C. "I'm glad you know the room rules, Jimmy, but not all the children know them as well as you do. It is my job to help them learn and remember the rules, and I will do that. It is your job to remember the rules and have fun while you are here. I take care of all the children in this room, and I will tell them how to behave."

Answers On Bottom
Of Next Page

Sue, who is three and a half, wants to hang on you and be with you all the time. She follows you around and does not want to play with the other children. How can you help Sue become more independent?

A. Tell Sue to choose an activity and go with her to that activity. Stay with her a few minutes and then say, "Sue, I am going to another table, but I will come back to see you in a few minutes." Be sure you do go back.

B. Tell Sue that today you are very busy so she must play with the other children for awhile by herself.

C. Tell Sue that she is a big girl now and that she must not hold on to you any more, but must play with the other children. Reassure her that you really like her very much.

Answers From Previous Page

Choice A is not a good solution because it continues to make Jimmy an enforcer of rules. While you have explained your role in the room to him, you also are allowing him to take on part of the teacher role, and the tattling will not stop.

Choice B is rather harsh and labels Jimmy a tattle-tale when he is trying to help. He may end up being confused.

Choice C is best because it explains your role and assures him you will explain the room rules to the children. You tell him what his role in the room is and reassure him that you are aware that he knows and follows the rules.

Ronnie is five years old. When he doesn't get his own way, his first reaction is to hit, kick or push other children. Even when he is playing, he is very rough and always wants to be first. How can you, the care-giver, help Ronnie learn more acceptable behavior?

A. When Ronnie hurts another child, tell that child to hit Ronnie back.

B. When Ronnie hits another child, tell him you will not allow him to hit others and that you will not allow them to hit him. Say, "In our room, we use words to tell people when we don't like what they are doing. If you hurt someone, then you will have to sit down and play for awhile." Keep an eye on Ronnie, and when he is playing well, tell him you like the way he is playing. When he hits, remove him immediately and make him sit away from the other children.

C. Tell Ronnie that he may not hurt children and that if he does, you will have to tell his parents not to bring him back to the center.

Answers From Previous Page

Choice A is the best answer because you are helping Sue to gradually let go of you and be on her own. Make the time away from her gradually longer and longer until she is able to play on her own most of the time.

Choice B cuts Sue off abruptly and will make her more insecure and more clingy.

Choice C will not help Sue even though you are reassuring her, because you have not convinced her that she can be on her own. Just because you feel she is a "big" girl will not help her feel she is able to be away from you.

John is four years old. He has been coming to the center for a month and still seems very shy and afraid to take part in any activity. He sits by himself most of the time and does not talk to you or the other children unless he is spoken to first. He then responds very quietly and does not say much. You are concerned about him and would like to help him. What can you do?

A. Say, "John, today you may paint at the easel. I want you to make a picture for your mother. Come and show me your picture when it is finished."

B. Say, "John, today you may paint a picture. I will stay with you while you paint. I'm sure your mother will be pleased with your picture."

C. Say, "John, today you may paint with any color paint you like. You may cover as much of the paper as you like."

Answers From Previous Page

Choice A doesn't teach Ronnie anything about how to handle his behavior. It only teaches hitting.

Choice B is the best answer because you are letting Ronnie know you will not accept his rough actions and why his actions are not allowed. You also are rewarding his good behavior and taking action when he misbehaves.

Choice C threatens Ronnie with action you probably cannot take without the director's permission. You are not helping Ronnie learn acceptable behavior.

Answers From Previous Page

Choice A could be frightening for a child who is unsure of himself. You are asking him to make a picture which he may not feel he can do. Also, you are asking him to show you the picture, and he may not be sure enough of himself to show his picture to you.

Choice B could also be frightening for the same reason as Choice A. Also by staying with him while he paints, you are making him more dependent on you. Unless you know his mother well, you should not assume she will be pleased with the picture. One reason John may be so shy is that his mother has very high standards. Children should paint to please themselves, not someone else.

Choice C is the best answer because you are setting up a situation where John cannot fail. You are not asking him to make a picture, just to cover the paper with some paint. When he has finished, you can easily praise him by saying, "I like the color (colors) you used, John." Help John go from situations where he is successful by himself to situations where he can be successful with one or two other children and then in the group. As John feels better about himself, he will be less shy and withdrawn.

HOW DO YOU HANDLE SITUATIONS INVOLVING HANDICAPPED CHILDREN?

One of the most important things to remember in working with handicapped children is that in most cases, they are more normal than handicapped. Children in wheelchairs may not be able to walk, but they can use their hands, eyes, ears, and brains to take part in activities. Deaf children cannot talk, or perhaps have difficulty talking, but they can communicate their needs and can take part in many activities. Mentally retarded children may need to be with a younger group of children rather than with their age level, but in most cases, they also can take part in many activities. Concentrate on what children can do, not what they cannot do. Get as many facts as you can about a child's handicap. Often parents can be helpful in telling you what to expect from a child. Handicapped children, like non-handicapped children, come from a variety of family lifestyles. They may be spoiled or overprotected. They may be too aggressive, too passive, or have other problems which are also common to non-handicapped children. Your job is to help all children feel comfortable and happy in your room.

WHAT WOULD YOU DO IF . . .

Jerry, who is four years old, has both a hearing and a speech problem. He has trouble telling you what he wants. He wears a hearing aid so he can understand what you are saying if you look at him and have him stand close to you while you are talking with him. Jerry is trying to tell you something as you stand near the table at art time, but you cannot understand him and he is becoming very frustrated. What can you, the caregiver, do to help Jerry?

A. Tell Jerry to speak very slowly and you will listen carefully to him.

B. Stoop down so you are at Jerry's level and repeat the words you understand that he is saying. Ask him questions about what he is saying that can be answered with yes or no.

C. Call a co-worker over to the table and see if between the two of you, you can tell what Jerry is saying.

Answers On Bottom
Of Next Page

Donna is four years old and is mentally retarded. She is in the two-year-old room. She is larger than the other children, and when she becomes aggressive, you are concerned she will hurt another child. How can you help Donna become less aggressive?

A. Tell Donna that she is a big girl and can hurt the other children when she hits them. Ask her to be your helper and give her special little jobs to do.

B. Watch Donna very closely, and when you see her going towards another child, take her by the hand and lead her to another activity.

C. If Donna hits another child, say, "No hitting, Donna" in a stern voice and lead her away from that child to another activity.

Answers From Previous Page

Choice A may work, but you are asking Jerry to do something that may be very frustrating to him and he may decide it's not worth the effort. You do not show him that you can understand some of what he is saying.

Choice B is the best answer because you are letting Jerry know that you do understand some of what he is saying. Also, you are questioning him, which shows interest, and he can probably answer yes or no quite understandably.

Choice C could be embarrassing to Jerry and would certainly call the other children's attention to his handicap.

Marcia, who is five, was born with one arm missing from the elbow down. She manages very well and takes part in the room activities. However, you have noticed a few children making fun of Marcia, and she is becoming most uncomfortable. How can you, the caregiver, handle this?

A. Tell the children that it is cruel to make fun of Marcia. Explain that they are making her feel badly.

B. During group time, talk about how nobody looks exactly the same way. Some people are short, etc. Marcia's missing arm will undoubtedly come up, and you can then explain that Marcia was born this way just as some of them were born with things that make them look differently. Then talk about what all of them have in common—eyes, ears, nose, mouth, hair.

C. Explain to Marcia that the children who are making fun of her don't understand why her arm is missing and that she should just ignore them. Tell her you think she is very pretty and that most of the children really like her.

Answers From Previous Page

Choice A is not the best answer because you are forgetting that Donna, while the size of a four-year-old, is actually only two. She will not understand what being a helper means and probably will be unable to do the special little jobs you give her.

Choice B will be very time-consuming and may be frustrating for you and Donna. It is unfair to assume that Donna is going to hit every child she approaches.

Choice C is the best answer because you are treating Donna as a two-year-old, which socially and mentally she is. Her age may be four, but her abilities are those of a two-year-old.

Answers From Previous Page

Choice A will probably not work because you have not explained why Marcia's arm is missing. The children are probably making fun of her because they are fearful of the unknown.

Choice B is the best answer because you are involving the whole group in a discussion. Marcia's handicap is explained simply and understandably. In discussing likenesses as well as differences, you help the children become more understanding.

Choice C does not help the group understand Marcia's handicap. Marcia needs help with group acceptance, and you are just telling her you accept her; but you are not helping her deal with the other children.

BE AWARE OF YOUR OWN FEELINGS AND PERSONAL STYLE WITH CHILDREN

Be Aware Of Your "Style" With Children

Every caregiver has his or her own way of being with children. We call this special way of being with a child the caregiver's "style." Your "style" of giving care to children comes from your past experience, what you believe about children and how you feel about yourself. "Style" of caregiving is very different from one's "skill" in taking care of children. A "skill" is a task you can do well. For example, you have seen a caregiver with the special "style" that looks something like the Pied Piper. It may have seemed when that caregiver appeared, a crowd of children surrounded her almost immediately. You were seeing the outcome of that caregiver's special "style." When the Pied Piper began to tell the children about the robin seen building a nest that morning, the caregiver's "skill" was showing.

Your "Skills" Can Always Improve

We think that by working through these modules your "skills" in working with children may change. Since your "style" of caregiving is more a part of your personality, it may not change. In other words, "style" is more the way you come across to others that has been developed from the time you were born. "Skills" are probably something of which you are more aware and may simply change by watching someone else work or by reading some new hints or ideas.

As you can well imagine, there are many styles of caregiving, and in every caregiving team, these many styles will be seen. Ideally, the team should become aware of these styles and match the caregiver "style" with the activities for which she or he is responsible. If this is done, many more of the goals of quality child care can be reached.

By now you are probably wondering what style of caregiving you have. Try the "Style Scale" on the next page and find out!

STYLE SCALE

Circle the number which you feel best agrees with what you believe or do.

	Usually True	Sometimes True	Seldom True
1. While talking with children, I touch them.	1	3	5
2. Children should take part in rule making.	1	3	5
3. Children should not be punished for their wrong doings.	1	3	5
4. Children's learning takes place all of the time, both during planned and unplanned activities.	1	3	5
5. When I am telling a child what to do, I usually start with "I .....!"	1	3	5
6. Children should be allowed to make their own choices.	1	3	5
7. I believe children should be praised and encouraged.	1	3	5
8. The plans for the day should be able to be changed.	1	3	5

Total Score _____

What Is Your "Style"?

If your score was 12 or below, then your "style" of caregiving is something like "Touchable Tina's." Working with small groups of children and giving special help to the child with a problem are what "Touchable Tina" does best. Or perhaps your score was higher than 12, but lower than 26. This is much like the score of "Friendly Frank" who is successful in meeting new children and working with groups of children. However, if your score was 26 or above, then you may be good at giving instructions and helping the groups of children move from one room to another, like "Cool-headed Heidi."

Whatever your score - remember, your "style" of caregiving is part of your personality and just as it takes all kinds of personalities to make up the world, it takes all kinds of "styles" of caregivers to make up a child care center.

Recognize Your Own Feelings About Differences

Every caregiver has likes and dislikes when it comes to children. Caregivers are not perfect and cannot like all children the same. If you become aware of your likes and dislikes, the you can understand some of your feelings toward certain children and why you sometimes act the way you do. For example, one caregiver told us she liked sad children. When we questioned her further, we discovered that when she could make a sad child laugh or feel better, she, the caregiver, felt good.

In the United States, many of us have not had a close friendship or much exposure to people who are racially or culturally very different from ourselves, or with people who have disabilities. Lack of exposure may create fear when faced with these differences. This is very natural.

It is important for you to be aware and honest about your preference, for example, for a child who cleans up his plate rather than a "picky eater." An awareness of your preferences will keep them from becoming prejudices. That is, the more sensitive that you are to your own reactions to differences, the better able you will be to assure that your preferences do not affect your behavior in a way that will make the child feel that she is not liked.

Discrimination in any form is especially damaging to young children who are forming their self-concepts and have no way of understanding behavior. It is harmful because they don't understand it.

As we have said before, children come in all shapes and sizes. On the next page, you can find out how you feel about some of these shapes and sizes.

LIKE AND DISLIKE SCALE

Place an X in the box that best describes how you feel about the child that is:

The Child Is	I Like Very Much	I Like	I Have No Particular Feeling About	I Don't Enjoy
active				
thin				
friendly				
loud				
obedient				
sad				
independent				
ugly				
shy				
happy				
whiney				
curious				
dirty				
slow				
pretty				
talkative				
smelly				
chubby				
alert				
clingy				
imaginative				
sickly				

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Explanation:

Now look at the X's you made on the previous page and fill in the following sentences with the words. Here is an example:

The child I like very much is sad, talkative, sickly, withdrawn, and imaginative.

You may not have enough words for every space or you may have to crowd the words into the spaces we have given you.

The child I like very much is _____, _____, _____, _____, _____, _____, and _____.

The child I like is _____, _____, _____, _____, _____, and _____.

The child I have no particular feeling about is _____, _____, _____, _____, and _____.

The child I don't enjoy is _____, _____, _____, _____, _____, _____, and _____.

Now that you know which qualities in children you like very much, you like, which you have no particular feelings about, and which you don't enjoy, you are ready to go to the next step. Do as we have done in the following example. First, write down a name of a child you know that fits each description you gave on the last page; then write down a few simple comments that describe what you do with that child.

Example: Children I like are like Tommy. When I am with Tommy, I often touch him, encourage him and help him with any special problem he may have.

Children I like very much are like _____ (name) When I am with _____ (name)

_____

_____

Children I like are like _____ (name) When I am with _____ (name)

_____

_____

Children I have no particular feelings about are like _____ (name) When I am with _____ (name), _____

_____

Children I don't enjoy are like _____ When I am with _____ (name)

_____

_____

There is one further step to go. Look at what you did with the child you liked. Were you by any chance like our "Touchable Tina" when you were with the child you liked? What about the child you didn't enjoy? Would we have described you as "Cool-Headed Heidi" when you were with that child? Perhaps you would like to look closer at your other answers as well and think about "styles" of caregiving that you may use when you are with different children.

Our point in doing this is to suggest that "styles" of caregiving may vary from time to time depending upon the child or children you are with. Be aware of your own feelings about differences and help all children feel that they are liked and their differences accepted.

Be Aware That Children Learn Through Play

All children play. Play is what children love to do and what they do best. They play with different toys at different ages and have different ways of playing as they grow up. Play is fun. Young children play most of the time they are awake, whether they are at home or in a child care center. In a center, play is not just a way to keep children busy or to pass time - it is the heart of the program. Children learn through play. It has been said that play is a child's work. When children build puzzles, tumble in the grass, create paintings, look at a book, share toys, they are working, just as surely as you are when you "come to work."

In a center, learning takes place largely through play. A variety of materials, a wide range of experiences, and caregivers who realize the importance of play will support the learning that is possible through play. Play helps children:

- enjoy life
- develop their bodies
- get along with others
- be creative
- release emotions
- develop their minds
- learn about their world
- feel good about themselves

Support A Child's Play

As a caregiver, you have several roles which will help make play a good experience for the children.

- You supervise the play, offering support and encouraging the children. Through your interest and praise, you let the children know that you respect their "work."
- You provide the play materials. If the children are to make choices, there must be a rich variety of materials available to them.
- You set limits and make rules about the care of materials - and you enforce the limits. Without limits on children's play, there would only be hurt children and broken toys.
- You may become a playmate, which gives you the opportunity to guide the learning taking place. When you get involved in children's play, it is important that you let them lead the way - it is their play. You cooperate, offer suggestions, provide additional information, or ask

questions that encourage children to think, but avoid organizing the play to the point where you are the one directing it.

You observe the play. As an observer, you can learn about the children in your group (their interests, their likes and dislikes, their abilities). This will help you guide them, understand them, and decide what kinds of activities and experiences need to be provided for them.

BUILDING YOUR SKILLS IN SUPPORTING PLAY

. . . Some Often Asked Questions And Situations To Explore

HOW CAN YOU SUPPORT CHILDREN'S PLAY?

Supporting play means that the caregiver keeps "hands off" the children's projects and games. The caregiver may stand or sit close by and encourage but should not build the house, draw the picture, or put together the puzzle for the child. Adults and children learn more by doing than by watching. Allow the children to make mistakes and encourage them to try again. Children learn by trying new things that they are not capable of doing. Do not force a child to finish a project if it seems too difficult.

WHAT WOULD YOU DO IF . . .

Jimmy, who is four years old, is doing a 15-piece puzzle. He says to you, "Watch me do this puzzle." You sit down next to him and notice that he keeps putting some pieces in upside down. What can you say to help him, but not do it for him?

A. "Jimmy, sometimes if a puzzle won't go in, you can turn it in a different direction, and it will fit."

B. "Jimmy, that piece fits at the top of the puzzle."

C. "Here, Jimmy, I'll put these two pieces where they go and then you will be able to do the rest."

Answers On Bottom
Of Next Page

Carol is playing in the block area. You go over to her and she says, "Help me build a house, please." How do you, the caregiver, respond?

A. "All right, Carol, first let's start with the long block. We will need four, and then we'll talk about what else the house should have."

B. "All right, Carol, what kind of a house do you want to build? How many blocks do you think we will need?"

C. "Fine, Carol, I'll build a house, and you can build a house next to mine. Then we'll have two houses."

Answers From Previous Page

Choice A is the best answer because you have given Jimmy an idea of how to change his approach to the puzzle but have not told him how to do the puzzle. It is still his project.

Choice B tells Jimmy where to put a piece of the puzzle, and from then on, he will ask you where each piece goes.

Choice C takes responsibility for the puzzle away from Jimmy and gives him the feeling he cannot do puzzles on his own.

Nancy is drawing a picture of the zoo she went to last Saturday. She asks you to draw an elephant for her. What do you, the caregiver, say to help her?

A. "I'm sorry, Nancy, but it's your picture, and you will have to draw the elephant yourself. Here is a picture in a book which may help you."

B. "All right, Nancy, I'll draw the head, and you draw the body and legs."

C. "If I draw the elephant, then it will be my picture, not yours. Do you remember what the elephant looked like? Was it big or little? What kind of a head did it have?"

Answers From Previous Page

Choice A makes you the director of the project and does not allow Carol to make decisions on the house.

Choice B is the best answer because it allows Carol to decide on the kind of house, the number of blocks, and from there to actually building the house. She becomes the director of the project.

Choice C will result in Carol building a house exactly like yours probably. She will not discover anything about building houses.

Answers From Previous Page

Choice A will be frustrating to Nancy because not only are you refusing to help Nancy, but you have given her a picture to copy that she can never equal.

Choice B has you drawing part of the elephant for Nancy, which makes the picture no longer totally Nancy's.

Choice C is the best answer because while you are refusing to draw the picture, you are giving Nancy a reason for your refusal. Also, you are asking questions which will help her remember what the elephant looked like and make it easier to draw.

PROTECT THE CHILD'S SAFETY

Be Alert To Safety Hazards

It is a rare person who works with children who hasn't said at one time or another, "I can't take my eyes off them for a second - they move so fast." Or, "I just left for a minute - it happened so fast." Yes, kids are quick and unpredictable. Kids are curious and active and don't always see danger ahead. They haven't learned what to fear. They often lack judgment about what hurts or what tips over. Kids are impulsive and excited about life and can't be trusted to remember to be careful. They use all of their senses in learning about the world - they touch, poke and squeeze; they sniff and smell; they see and they listen; but they also put things in their ears, eyes and nostrils; and the mouth is used to test and taste everything. They try out everything they get their hands on. They trip over things, they love to climb, they lose their balance and they fall. When they are angry, they may push and shove, kick and bite, or throw things.

Accidents are the major hazard and the leading cause of death in children. There are hundreds of ways that a child can be hurt. All young children have their share of cut fingers, scratched knees and bruised legs while growing up. Although upsetting, minor hurts can usually be treated with a small Band-Aid and lots of love. However, no child should have to live through a serious accident. Scars, loss of an arm or leg, a damaged eye are stakes that are too high.

The safety and protection of each child is the responsibility of every member of the staff. Dangers are everywhere in a center at every moment of the day. Over the years, doctors and safety experts have learned a great deal about accidents and how they occur. We would like to share some of this information about the more common safety problems with you.

When are accidents most likely to happen?
when you don't know what to expect of a child or are not familiar with the activities of the children. (Are the monkey bars too high for three year olds?)

. when a child is hungry, thirsty, overactive or rushed.
. when you are tired, impatient, unhappy, not feeling well or have personal problems.
. when hazards are present and not closely supervised - sharp scissors, swings, busy streets.
. when rules are not established and children don't know what to expect.

What are some safety hazards in child care centers?

Playground equipment can be extremely dangerous for all children, but so can beds. Children can fall from a bed as easily as from a swing set and hit their heads on a sharp corner. Use your housekeeping eye to look for sharp edges, slivers, things that may tip over, uncovered electrical outlets, loose items on toys, rough edges on equipment, water spilled on the floor, broken toys, lights that are not working.

Take Preventive Steps

Prevention is the best defense against children's accidents and the most important part of child safety. Become safety conscious - think about it, plan ahead.

Help children learn to do things the safe way. They depend on your help in learning the safety rules at all ages and they must be protected while they learn to protect themselves. Here are some steps that will help children learn about safety:

. Explain the limits or the rules, using simple words - "We use our WALKING feet inside." "Blocks are to build with" (not hit with).
. Teach the rules patiently and repeat often.
. Be consistent - rules should not be changing constantly.
. Remind the children of the rules when they forget or if they ignore them.
. Don't be afraid to insist or step-in, if absolutely necessary.
. As a last resort, remove the child from the situation if he continues to be careless.

Use your common sense. Accident prevention is simple and obvious if you really "see." Try not to be overly fearful and set too many safety rules. Take care not to be overprotective.

Children need adventure and opportunity to explore and move about. We must allow them to do these things without exposing them to unreasonable harm or smothering them with our own fears.

Practice safety yourself at all times. Children are great imitators. If they see you climbing on windowsills to straighten the curtains, they will climb on the windowsill, too.

Your common sense and watchfulness are the most valuable aids of prevention ever invented.

Learn Your Center's Policy Regarding Accidents And Emergencies

Although we all try to prevent accidents, they will happen. As a caregiver, you must know how to act when an emergency occurs. Learn your center's policy regarding :

. first aid procedures
. transporting children for medical care
. evacuation of the building in case of fire
. reporting accidents to parents

BUILDING YOUR SKILLS
IN PROTECTING
CHILDREN'S SAFETY

. . . Some Often Asked
Questions
And
Situations To Explore

HOW DO YOU HANDLE SAFETY HAZARDS AND ACCIDENTS?

If a child is accidentally injured in the center, attend to the child—giving only first aid that is positively necessary and approved by the director. If you are in doubt as to what needs to be done, just keep the child comfortable and get help. It is vital that you remain calm and give the child a feeling of security while giving aid or awaiting assistance.

WHAT WOULD YOU DO IF . . .

You are reading a story to the four-year-old group and suddenly you notice Carol has a nosebleed. What would you do?

A. Take Carol by the hand, encourage her to hold her head back, and lead her to the bathroom. While you are walking towards the bathroom, tell the other children to sit quietly and say you will be right back.

B. Tell Carol to go to the bathroom and you will be with her in a few minutes.

C. Ask one of the other children to get some wet towels while another child brings tissues to Carol to hold on her nose.

Answers On Bottom
Of Next Page

You are with your group of three-year-olds when suddenly Todd runs, falls and hits his head on the corner of a shelf. He lies on the floor and seems to be unconscious, then opens his eyes and appears confused about where he is. He then cries very hard. You are afraid he has a head injury. What would you do?

A. Pick Todd up and see if he can walk. Apply cold water to his head and call his parents.

B. Pick Todd up and take him to the director's office so she can take the proper action.

C. Stoop down and comfort Todd. Then open your room door and see if someone is in the hall and can get help. If not, ask the caregiver in the closest room to keep an eye on your group and carry Todd to the office.

Answers From Previous Page

Choice A is the best answer because you are taking care of Carol yourself and also reassuring the rest of the children. If the bathroom is outside the room, ask another caregiver to check on your children while you are gone.

Choice B will probably only cause Carol to become more frightened and the other children will worry about Carol.

Choice C gives children the responsibility you should be taking.

A toddler awakes from his nap crying and you pick him up. You notice he has pushed a small piece of dry cereal up his nose. It seems to have swollen and he is having to breathe through his mouth. What should you do?

A. Ask the child to blow his nose and it will probably come out.

B. Take a pair of tweezers and see if you can pull it out.

C. Ask your director to call his parents and have them take him to the doctor.

Answers From Previous Page

Choice A is not the best answer because you are not taking enough action. When you suspect a head injury, it is important to get help quickly.

Choice B leaves your other children alone and this can be dangerous because another child might get hurt.

Choice C is the best answer because you are tending to Todd first and then trying to get help quickly. You are not leaving the other children alone.

Answers From Previous Page

Choice A is not a good answer as toddlers usually cannot blow their noses and the child might suck in, instead of blowing out, and lodge the cereal more firmly.

Choice B is not the best answer because you should never put anything in a child's nose or ears. You could seriously harm the child.

Choice C is the best answer because only a doctor should remove material from ears and noses.

HELP CHILDREN UNDERSTAND WHAT TO EXPECT

Be Aware Of Center Routines

Routines are activities that occur regularly. Daily routines are repeated activities such as getting up, brushing your teeth, eating breakfast and going to work, around which your time is organized. Young children who are learning to make sense of the world pay attention to such routines. A routine provides a sequence that lets the child anticipate and understand what is going on and what to expect. Children generally like routines because they make them feel secure.

When a child is away from home in an unfamiliar situation, such as a child care center, routines that she can recognize may help her feel more comfortable. Examples of daily routine activities in a center are arriving at the center, snack time, toileting, mealtime, naptime, leaving the center. Routines also give children a feeling for the passage of time - "after my nap, I see a movie and then daddy comes."

Breaks in a familiar routine, or movements from one part of a familiar routine to another that are too rapid, may make a child feel uneasy. Unexpected changes may make a child feel that something unintended has happened and that something unfamiliar will replace it. It is not always easy for a child to adjust to change quickly.

Help Children Make Transitions

As a caregiver, you can help children make the transitions between one activity and another easier. It will be easier for you, too! We have found that taking time to think of a few transition activities ahead of time can make the day at a center a lot smoother.

Transition activities are learning activities that move a child from one activity to another. Children have varying attention spans, and the time between one activity and another can be a dull and wasteful pause or chaos! With a little thought, you can use a transition activity to direct children from play to mealtime, for example, without giving them direct instructions or making them wait and do nothing while everyone else is getting ready.

By anticipating the transition yourself ahead of time, you can give the children early notice that in a few minutes something else will be happening. As a child gets used to a routine, it is not necessary to repeat the directions about what is happening every day. A touch, your movement to another part of the room, or a familiar record playing a "clean-up song" may be enough to signal that a transition is coming.

Having to share facilities, play areas, lunchrooms or nap areas with other caregivers in a center requires that some kind of time schedule be observed. This should be done without letting the children realize that their activities are precisely timed. An activity should be planned for the children which can be finished easily within the time allowed and still give ample time for clean-up. Remember, there will always be some children who will finish cleaning up before others. For these, some brief activities can be planned - a simple finger play, a little song.

When attempting to move a child or an entire group of children, take advantage of their interest in physical activities (moving their bodies). Children love to hop, jump, skip, walk on their heels, slink like snakes, play follow the leader. Use their interest to help you. For instance, if you want to encourage a child who is reluctant to go to the bathroom, say, "Let's go hopping" - while you lead her to the bathroom - admiring her ability. Or if you want to move a large group of children quietly down a hallway, say "Let's all get in line - holding the waist of the child in front of you - and slink like a snake. Do you remember that snakes don't make any noise??" - and down the hall you go, crouched low and silently moving in a wiggly line. These devices are successful because the children get satisfaction out of controlling a new movement of their bodies. They also enjoy hearing your appreciation of their skills and feel important about doing it well.

Physical activities such as these also can be used to fill gaps for children who have finished before others ("Can any of you walk on the sides of your feet?" "Can anyone hop 20 times on their left foot without speaking?"). These activities will occupy them for several minutes, while giving them exercise.

Another transaition which often presents a difficulty is cleanup time. This is understandable if you think about it—do you really like cleaning up?? Of course not, it's more fun to do something you enjoy. Children may not always feel ready to put activities away and help with cleanup. If, however, the children are helped to feel and act like responsible helpers at this point, they can get satisfaction in being able to work cooperatively with you and the others. Use your imagination to devise ways of helping them. You may have to set an example by cleaning up with them. During cleanup, you may want to talk about what you are doing or what you are going to do when cleanup is finished. Sometimes, making a game of cleaning up or singing songs will help.

Set And Enforce Limits

Children will feel more secure if they are given freedom within certain limits. Too much freedom may be confusing to children because they are not yet ready to make all decisions by themselves. Limits let children know how far they can go. Limits prevent dangerous and inappropriate behaviors and help children learn to make decisions. All children must learn their boundaries and the limits which are essential in life. They need to know that there are friendly adults who will not let them go beyond those limits when their own self-control fails them. They need your help in learning and obeying the limits.

Children need to know what the limits are and what will happen if they do not obey them.

When you, the caregiver, set limits, be sure that they are reasonable and can be enforced each time a child oversteps one. Also, be sure the limits are not too strict and that they fit the needs of the age group you are working with. Try not to set too many limits on the activities in the room. Remember, the best limits allow the children to explore and grow in your room safely without either harming other children or themselves.

The key to enforcing limits is being consistent and honest with the children from the beginning. Children are not likely to listen to the rules you set today if they are not the same as the rules you set yesterday. And, they will not believe the limits are <u>real</u>, unless you do what you said you were going to do. For instance, if

you have told the children that if anyone else throws sand, that child will be removed from the sand area - then you must do exactly that when another child does throw sand. Children can accept limits if the limits are understandable even though they may fail occasionally in their ability to keep within the limits.

Using a loud voice to enforce limits may excite children and speed them up rather than getting them to stop. Yelling at children serves no useful purpose except to add to the noise level of the room. Threatening children ("If you do that one more time...") may only serve as a challenge to them. They may very well "do it one more time" just to test you. We are all familiar with children who seem to delight in "trying out" adults. They do not know how far they can go, therefore, they continually experiment with this "trying out" process.

When the limit is not obeyed, repeat the limit to the child and then take action to enforce it. For example, if there is a limit of four children at the coloring table and Johnny is the fifth child to come to the table, say, "Johnny, only four children can be at the coloring table. Find something else to do until there is room at the table for you."

Think About The Messages You Give

Children learn in many ways, because they are individuals in their own right. They learn by experimenting with things in the world around them. They learn by imitating others, by example. They learn very little through verbal instruction.

Talking is not the only way you communicate with children. Communication includes the expression on your face (frown, smile), gestures (hugging, grabbing), and other actions (busy, excited, lazy, happy, tired). Being able to communicate with children is probably the real answer to helping chidren learn what to expect.

Too much talking around children is very confusing. They get used to the sound of your voice and soon pay no attention to what you are saying.

Make Eye Contact

When you do have something important to say to a child or group of children, you first must be clear in your own mind what you want to say. Then make sure you have their attention and eye-to-eye contact before you begin to speak.

When talking with a child, always go to the child and speak directly to her. Get down on the child's level to talk face-to-face and look into her eyes in order to hold her attention. If necessary, gently hold her face so that she is looking at you.

Keep It Simple

Use words and phrases which children can understand. Statements should be clear and simple. Keep it brief - don't talk aimlessly and give long explanations. Avoid the common tendency to repeat any direction or question three times.

Use Your Natural Voice

Be aware of the tone of your voice - keep it natural. Avoid the temptation to use a special voice. We've all heard adults who use special voices when talking with children (you may remember some from your childhood). There is the "sweet" voice, which is high-pitched and icky and sounds phony to everyone, particularly children. Or, there is the "let's be friends" voice, which is almost too cheerful. Or, the "little" voice, which makes the children think you are just an "extra-big-child" - not an adult. Or, the "I'm the boss" voice - loud, harsh, and frightening to children. Listen to yourself and look at the children when you are talking - their faces and behavior will tell you what they're hearing.

Listen

And, most important of all, talk with - not to - the child. When a child talks - LISTEN! He or she has much to say.

Make Positive Suggestions

It is often a temptation to talk to young children negatively - telling them only what not to do. ("Don't do that!") If a child has already done something he shouldn't do, he needs help from you in getting another, better idea. When you state what you want him to do, you give him this kind of help. This is called positive suggestion. It is one which tells a child "what to do" instead of "what not to do." For instance, you say: "Take a bite of your lunch now," instead of, "Don't play at the table;" or, "Play ball over here," instead of, "Don't hit the window." Learning to make only positive suggestions does take practice, but it's worth the effort - you will get results with the children.

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When a child misbehaves, express disapproval of the act, not the child. Don't say, "You're a

bad girl, Sally! You stop kicking." Instead, say, "I don't like kicking. We do not kick." No child is either "good" or "naughty" or "cute." Avoid trying to change a child's behavior by methods, which may give him a negative self-concept. Let him know that your disapproval of his behavior doesn't mean that you find him, as a person, "bad" or "naughty." Also, never compare one child with another.

Help Children Feel A Part Of The Group

When a child comes to a child care center, she or he becomes one of many, and you must face the question about how to help the child become part of the group of children. Greeting children warmly, making them feel welcome and using their names will help the children feel important. Some children will move quickly into the group with no hesitation. Others may need help. You may need to hold and comfort children who are upset because their parents have gone. Quiet children may need you to take them to a group of children involved in looking at books and remain with them for a short time. Showing children the equipment and activities in the room also helps them know what to expect and what they may do. Sometimes the easiest way to help children adjust to a group situation is to let them know you understand how they feel ("I know you feel sad, because you miss your mother." "I know you feel scared. There are so many children.") A single statement works best with young children, then drop the subject. However, keep reassuring the child throughout the day.

Activities which encourage the cooperation of several children - making a valentine box for the room, playing games like Farmer In The Dell - help children feel like part of a group. Displaying art work, which the children have done, on the walls of the room also gives children a sense of belonging to the group. Can you think of some other ways to help children become part of a group?

You, the caregiver, must face another question when working with the children's groups. How can you handle the group of children? Is it better to work with them in one large group or should there be several smaller groups? How can you work with each individual child in the group? The answers to these questions are not

easy. There are many things you must consider: the total number of children in the group, their ages, how many caregivers are working with you, the interests and needs of the children, and your personality.

Although there are many things to consider, keep in mind that learning to be part of a group is a major task of young children. They need to have experiences in both large and small groups. By being a part of a group, children learn that they do not live alone in the world and the needs and rights of others must be considered. Children need to feel that they are loved and becoming part of a group gives them feelings of security, confidence, and belonging.

Keep The Groups Small

But, if the group is too large with too many children crowded in one area, children may be frightened. Large groups are tiring for children and may be the cause of accidents or misbehavior. It is usually easier for both you and the children if the groups are kept smaller. Instead of one large group listening to music, it may be better to have several small groups doing different activities in each area of the room.

This does not mean children should never be brought together as a large group. When there is an important reason to do so, you should not hesitate. It is better to gather the children in a large group when you have something to discuss with all of them, such as, going on a field trip, preparing them for special events at the center, or reminding them of playground safety rules. Your center probably has a prearranged signal, such as blinking the lights or singing a song, to quiet the children and bring them together. Use the signal and save your voice. And remember, the time the children are kept in the large group should be brief.

Give Individuals Attention Within A Group

When you have a child who is very uncomfortable joining either a small group or a large group, you should try to give that child attention <u>within</u> the group situation. For example, while talking with the child, you can still be glancing briefly around the room at the other children - or you can allow the child who is uncomfortable to sit close to you while you read a story to the others. In a center, the individual child and group both need your attention.

Sometimes when the children are in small groups, you may have to explain to a child that there are too many children already involved in a project or an activity (building blocks, making a sand castle). In this case, you must tell him that he will have to wait a turn.

Teach Respect For Each Other's Rights

Taking turns and sharing are daily experiences in a child care center or any time a group of children is together. A child can learn to respect his rights and the rights of others if you help him understand that:

- he can keep a toy that he is using
- he may have any toy that is not being used
- he may take only the toys he can use
- he must wait for a toy that another child is using
- he may ask others to have a turn or to share
- he must give everyone a turn on major pieces of equipment (swings, climbing bars) and wait in line for his next turn
- he may share his toy with others

Help Children With Their Behavior

There are times when a child must be removed from a group for inappropriate behavior - hitting, kicking, tantrums - and helped to solve her problem. When this happens, the child is out of control and needs your help to regain control. It is better to remove the child to another room, if at all possible, where she will have only herself and you to deal with until she again has control of herself. When she is ready to return to the other children, you should help her find a place in the group again, perhaps in a favorite activity.

Pay Attention To Group Cues

Working with groups of children is different from, and often more demanding than, working with an individual child. By determining what is best for the children in the group, you will also determine what is best for you, the caregiver. If the children are becoming very noisy and a few are acting silly, which bothers the others, it's time to get the attention of the children and maybe change activities. If the children have been sitting quietly with puzzles, and you begin to notice wiggling and arguments starting to take place, perhaps the children need to do something more active. The behavior of the children can be your guide. By focusing on what is best for them, you are helping the children take pleasure in being part of the group.

BUILDING YOUR SKILLS IN HELPING CHILDREN UNDERSTAND WHAT TO EXPECT

. . . Some Often Asked Questions And Situations To Explore

HOW CAN YOU HELP CHILDREN UNDERSTAND WHAT TO EXPECT?

Children can be helped to learn what to expect in a child care center by, most importantly, - YOU - and your genuine love and concern for them. Love and hugs are CONTAGIOUS. If you love, you will be loved in return. Don't be afraid to show that you care...and, above all...CARE. With your help, children will learn what life in a center is all about. Remember, if we fail to help children understand what to expect, we only increase their feelings of being little and helpless.

WHAT WOULD YOU
DO IF . . .

Matt has finished his lunch and is wiggling in his chair while he waits for the other children to finish eating. What can you do to keep Matt occupied while the others finish?

A. Say: "Matt, you may go and look at a book while the rest of the children finish lunch."

B. Say: "Matt, stop wiggling and wait quietly until everyone is finished eating. The rule is that we sit at the table until everyone is finished eating."

C. Say: "Matt, since you have finished your lunch, you may clean up the scraps off the floor and put them in the trash. You will be my helper."

Answers On Bottom
Of Next Page

Janet, who is two and one half, goes over to Chad, who is two, and takes his truck away. Chad immediately begins to howl and tries to pull Janet's hair. What do you, the caregiver, do?

A. Say: "Janet, Chad had that truck first. Now give it back to him. You can play with it when he is finished playing."

B. Say: "Chad, you have played with that for quite awhile. Why don't you let Janet play with it now, and I'll find you another toy to play with."

C. Say: "That's Chad's truck, Janet. Come with me and I'll find a truck for you to play with."

Answers From Previous Page

Choice A is the best answer because it gives Matt something pleasant and quiet to do away from the group until all have finished eating.

Choice B forces Matt to stay in his chair where he will continue to wiggle and probably disturb the rest of the children. The rule is not a very good one.

Choice C is not the best answer because while being teacher's helper is sometimes fun, in this instance, it probably is not. Also, Matt will still be around the lunch table and may interrupt and slow down the other children who are still eating.

Jennifer has played actively all morning and is excited about shopping with her mother after naptime. She says she isn't sleepy and is wiggling and sitting up on her cot. How can you, the caregiver, help Jennifer settle down?

A. Tell Jennifer to lie down and when all the children are asleep you will let her get up and look at a book.

B. Tell Jennifer that at naptime all the children must rest and to lie down. Say that she will soon be able to sleep and when she wakes up, her mother will be there to pick her up and take her shopping.

C. Tell Jennifer to lie quietly on her cot and you will come to her after the other children are resting quietly. Go to Jennifer and sit quietly beside her and rub her back.

Answers From Previous Page

Choice A will not work with two-year-olds because they don't understand sharing or waiting for a toy.

Choice B will not work because again children at two do not understand sharing.

Choice C is the best solution because Chad gets his truck and you redirect Janet to another toy. Two-year-olds do not understand lengthy explanations. Actions with this age group work best.

Betsy, who is five and a half, has just begun coming to the center and is having trouble following the limits. You suspect that she comes from a home where she is allowed to do anything she wants. It is cleanup time, and Betsy refuses to help pick up the scraps of paper around her table. What do you, the caregiver, do?

A. Say: "Betsy, in this room, we all help clean up after playtime. I would like for you to pick up six scraps of paper and put them in the trash basket. Then you may go to the rug for storytime."

B. Say: "Betsy, if you don't pick up the paper, you will have to sit in the time-out chair and not listen to the story."

C. Say: "Betsy, in this room, you must clean up your scraps. Now I will help you today, but tomorrow, you will have to pick up the scraps yourself."

Answers From Previous Page

Choice A defeats the purpose of naptime and gives Jennifer and the other children the idea that if they are restless, they will be able to get up.

Choice B is not the best answer because you are not really helping Jennifer by mentioning the shopping trip. You will excite her more.

Choice C allows you to get the other children settled down, and then you can help Jennifer relax more by rubbing her back and not talking to her. She will probably go to sleep once she relaxes enough.

Children are sitting down for story and music just before lunch. They all have to wash their hands before lunch. How can you, the caregiver, best handle this situation?

A. Say: "Boys and girls, we are going to sing some songs before lunch. I will call a few names at a time. When you hear your name, go and wash your hands and then come back and sing with us."

B. Say: "After we sing a few songs, it will be lunchtime. The boys may line up to wash their hands first and then go to the table. The girls will line up after the boys, and wash their hands."

C. Say: "While we sing some songs, I want the girls to go and wash their hands and then come back and sing with us. When all the girls have washed their hands, then the boys may go. When everyone has washed their hands, we will eat lunch."

Answers From Previous Page

Choice A is the best answer because you have told Betsy the rule and set a reasonable number of scraps for her to pick up. You have explained exactly what she is to do.

Choice B does not explain the rule and threatens Betsy. She is learning nothing about limits and how to adhere to them.

Choice C gives Betsy the rule, but then you do not have her adhere to it. You give her an "out" which she will probably expect you to do everyday.

Joe, who is 5, is playing in the block area and is building high towers and kicking them over. You are afraid another child will get hurt. You explain to Joe that the rule in the block area is that blocks are to be used for building, not throwing or kicking. Joe continues to kick his towers. What do you, the caregiver, do?

A. Say: "Joe, no more playing with the blocks for you! Now go sit in the time-out chair until you can remember how we play with blocks."

B. Say: "Joe, since you don't seem to be able to remember how to play with blocks, you will have to leave the block area and not play with them any more this morning. Perhaps this afternoon or tomorrow you will remember the rules for blocks and can play with them."

C. Say: "Joe, remember I said don't kick the blocks? Now if I catch you kicking them one more time, you will not be able to play with the blocks again."

Answers From Previous Page

Choice A is the best answer because all the children will be kept busy during handwashing time. Also, allowing a few at a time to wash will not create waiting and confusion in the bathrooms. This will speed up the process.

Choice B is not the best answer because none of the children will have anything to do while the handwashing is taking place. Children have a very difficult time waiting in line, and this process will create problems.

Choice C allows a large number of children to wash their hands at one time, and there will be too long a period spent waiting for a turn. This will create problems.

The children have been involved in a variety of activities and it is now time to clean up and get ready for group time. What is the best way to handle this smoothly?

A. Say: "Boys and girls, it is cleanup time. Everyone, stop now and put away the toys, paper and crayons and come to the rug."

B. Say: "Boys and girls, in a few minutes when I blink the lights, we will clean up. Watch for the lights and clean up quickly when they blink."

C. Go to each activity and say, "It is now time to clean up." Make sure they have started to clean up before you go to the next group.

Answers From Previous Page

Choice A does not state the rule and will probably make Joe angry so that when he gets out of the time-out chair and goes back to the blocks, the rule will be broken again.

Choice B is the best answer because you are letting Joe know that in order to play with the blocks, he has to remember the rules. Removing him from the blocks for a period of time will reenforce the rule. He will learn that playing with blocks is a privilege that has rules which must be followed.

Choice C is not a good answer because you are taking no action to reinforce the rule. Also, when you say, "If I catch you," it tells Joe that he cannot kick blocks when you are looking, but may get away with it when you are not looking.

Jack, who is two and a half, is playing with the sand and keeps throwing it out of the container onto the floor. You have told him twice that the sand stays in the sand-table and must not be thrown on the floor. What do you, the caregiver, do now?

A. Tell Jack you will give him one more chance and then he will have to go to the time-out chair if he throws the sand again.

B. Say: "Jack, I told you the sand stays in the sand-table. Now come with me and we'll find something else for you to do."

C. Say: "Jack, I told you not to throw the sand. Now you can't play with it anymore."

Answers From Previous Page

Choice A gives the children no warning, and you will probably have to go around to each group, telling them to clean up now. This slows down the process.

Choice B is the best answer because the children will have some time to finish their play and will be ready when you blink the lights. You will not have to remind as many children a second time if you use this approach.

Choice C slows down the cleanup process because you have not given the children time to finish their play. By waiting for each group to finish and begin cleaning up, the process will take much longer.

Sue and Jamie are both four years old. They love to play together, but they often quarrel over who is to be first, and each seems to want to play with the same toy. They come to you to settle all their arguments. How can you, the caregiver, help them to share and play more happily with each other?

A. "Sue and Jamie, you must take turns. Now Jamie, you can play with the doll first and be the mother, and then give Sue a turn to be the mother."

B. "Sue and Jamie, since you can't play nicely with each other, you had better each play in a different place and not play together for awhile."

C. "It sounds to me as if you two are having trouble deciding how to play house. Could one of you be the aunt, or neighbor, or grandmother, while the other one is the mother. Perhaps you can think of a way that both of you can take care of the 'baby' together."

Answers From Previous Page

Choice A will probably not work because two-year-olds don't understand about chances or threats. Action is the best policy. Time-out chairs are confusing to the two-year-old and makes him fearful.

Choice B is the best answer because you have told him where the sand belongs, and since this isn't working, you redirect his attention to another play area. Again action, not words, works best with the two-year-old.

Choice C does not help Jack find something else to do, and you will probably have a temper tantrum on your hands with this approach.

Answers From Previous Page

Choice A does not allow the children to make their own decision on how to play. You make the decision for them and are encouraging them to continue to come to you with their arguments.

Choice B does not solve the problem because you are separating the girls and not allowing them to work out a solution.

Choice C is best because it states the problem as you see it and suggests alternative ways to play. You also are encouraging the children to try and work out their own solutions. This will eventually pay off by having them come to you less for solutions.

Here are some new situations with possible ways of handling them. Circle the answer you think is correct now that you have worked through this first module. You can find out how much you have learned about your role as a caregiver in a child care center by comparing your choice of answers with our answers (see page 253).

AS AN INFORMED CAREGIVER, WHAT WOULD YOU DO IF . . .

1. Trina's father tells you that Trina, a five-year-old, has gone back to soiling her pants, after having been totally toilet trained since age two. The father asks you what should be done. As a caregiver, you:

   A. Suggest to the father that perhaps Trina should be seen by a doctor.

   B. Suggest to the father that Trina, like so many other children, is beginning to soil herself because she is jealous of her baby sister.

   C. Suggest to the father that Trina's eating habits may need to be changed.

2. Mary is painting a huge valentine and asks you what two colors she can mix to make pink. As a caregiver, you say:

   A. "Mary, the colors that make pink are red and white."

   B. "Mary, do you remember when we mixed paints? What color did we use to make the other colors lighter? Good! Now what color might you add to the white to make pink?"

   C. "Mary, first take some white paint and then add some red. Add only a small amount at a time so you can get the pink you want."

3. Clint, who is six, has been working hard on learning to print his name. He continually puts the "l" first in his name and then the "C." Clint has just finished doing this. He walks over to you and asks you to comment on his work. What can you say to help Clint correct his mistake? As a caregiver, you say:

   A. "Clint, here, let me show you how your name is printed."

   B. "Clint, the 'i,' 'n,' and 't' are in the right places. Now try putting the 'C' first and then the 'l'."

   C. "Clint, you can do a better job than this. Now try again."

4. It is almost time for the children to go outside to play, and they are finishing a variety of activities. It is time to clean up, and you would like for them to do this without a lot of confusion and noise. As a caregiver, you say:

   A. "Boys and girls, it is almost cleanup time, so try to finish what you are doing. I will tell you when it is cleanup time."

   B. "Boys and girls, the first children to clean up quietly will be the first to go out and play."

   C. "Boys and girls, it is time to clean up." Then go to each activity and help them get started.

5. Carl, an eight-year-old, has been playing baseball. While turning to catch the ball, he runs into the outside wall of the center. At first, Carl lies quietly. Then he begins to thrash his arms and vomit. You are afraid Carl is going into shock. As a caregiver, you:

   A. Tell the other children to continue to play. Then you pick up Carl, take him to the center, and cover him with a blanket.

   B. Ask some of the children to help carry Carl to the center. Then ask the director to examine Carl.

   C. Ask one of the other children to go and get the director. The director will examine Carl and take the proper steps in caring for him.

6. Tom, age three, always cries when father leaves. Father has come back several times to comfort Tom. Since you would like to help both Tom and his father, as a caregiver, you:

   A. Tell father the plans for the day and assure him you will stay close to Tom for a short period of time. You then suggest to father that he call after an hour or so and receive a report on Tom.

   B. Tell father this often happens with three-year-olds. Then suggest the father stay for awhile until Tom gets involved in some activity.

   C. Tell father that children usually stop crying shortly and that he should leave. Also explain that you will watch Tom carefully.

7. Each time the other caregivers are unhappy with something at the center, they ask you to speak with the director. You are becoming concerned that the director may think you are a troublemaker. As a caregiver, you discuss the situation:

   A. With the caregivers who request you to speak with the director.

   B. With the director and explain how you feel.

   C. With your friends and find out what they would do.

8. Anthony often calls people names when he does not get his way. This carries over even to calling the caregiver names, like "Bossy," when he is asked to do something. How can you help Anthony learn more acceptable behavior? As the caregiver, you:

   A. Tell Anthony you cannot allow him to call anyone names. Then say, "In our room, we tell people how we feel without name-calling. If you call people names, then you will have to sit down and not play for awhile."

   B. Tell Anthony when he calls people names, they think he is silly. Then say, "Anthony, I want you to think about other ways of talking to people without calling them names."

   C. Tell Anthony name-calling is a bad habit. Then say, "Anthony, I am going to ask your mother to wash your mouth out with soap when you call people names at home."

9. Ann, who is five years old, was born with one leg shorter than the other. She is able to move about quite freely; however, some of the children tease her and call her "Limpy." As a caregiver, you:

   A. Tell Ann that children don't understand about her leg and suggest that she explain it to them. Then give Ann some time in front of the children to talk about her handicap.

   B. Tell the children during group time that you are going to discuss the ways people look different. Ann's limp will probably come up, along with the differences among the other children. Then have the children discuss how people are the same.

   C. Tell the children they should not call other children names. Explain that people who are handicapped feel badly about themselves. Ask the children to think of ways they can make Ann feel better.

10. Prissy is very interested in playing with the large blocks and other large muscule toys. When Prissy's mother comes to the center, she always asks if Prissy has painted today. She then becomes very upset if Prissy has not. As a caregiver, you say:

   A. "Prissy did not want to paint today, but she did want to play with the blocks. Playing with blocks is one of Prissy's favorite activities."

   B. "Prissy did not get around to painting today. She usually paints such excellent pictures, and I am sure she will paint more in the future."

   C. "Prissy really enjoyed playing with the blocks today. Tomorrow, we are going to talk about colors. I have an art activity planned which I think Prissy will enjoy."

11. Pepe, who is two years old, tries to grab one of Jane's large puzzle pieces. Jane begins to whine and tries to push Pepe away. As a caregiver, you say"

   A. "Pepe, Jane had the puzzle first. I cannot allow you to take another child's toy."

   B. "Pepe, that is Jane's puzzle. Here, you may play with this puzzle of an apple."

   C. "Pepe, you must wait your turn. You may have the puzzle next."

12. When Debbie, a four-year-old, becomes angry she pinches other children. Many of the parents have complained about bruises they see on their children, where Debbie has pinched them. How can you help Debbie find another way of dealing with her angry feelings? As a caregiver, you tell Debbie:

    A. "I cannot allow you to pinch the other children, Debbie. In our room we tell people how we feel instead of pinching them." If Debbie pinches again, tell her she must sit down for awhile and not play.

    B. "Debbie, mothers and fathers are complaining about your pinching. I cannot allow you to pinch the other children." If Debbie pinches again, tell her she must sit down for awhile and not play.

    C. "Debbie, I cannot allow you to pinch the other children. If you pinch anyone else, I am going to ask your parents not to bring you to the center." If Debbie pinches again, tell her parents.

13. June, a large girl of seven years of age, comes to the center daily after school. She always has trouble following the rules. Today she has brought a pocketknife from home and is whittling with it. As a caregiver, you say:

    A. "June, because we have so many children here, we cannot allow knives to be brought to the center. I will keep your knife for you until you go home. Please leave it home in the future."

    B. "June, if you don't put the knife away, you will have to sit in the time-out chair, and you will not be allowed to help us make popcorn. It is dangerous to the other children when you bring a knife to the center."

    C. "June, in this center, we cannot allow knives. Put it away now. I don't want to see it again."

14. Molly and Julie are both five years old and like to play with one another. When Gina comes to the center and is included in the girls' play, arguments often develop. When this happens, the girls come running to you to settle their problems. How can you help the girls learn to play happily together? As a caregiver, you say:

    A. "It sounds to me as if the three of you are having trouble playing together. Three people can rarely get along - so, Gina, go play with someone else."

    B. "It sounds to me as if the three of you are having trouble deciding how to play school. Perhaps one of you could be the teacher, one the student, and the third, a visitor to the classroom. Maybe you can all think of an activity to teach in your classroom."

    C. "It sounds to me as if the three of you must learn to get along together. Now, Molly, you be the teacher, and, Julie, you and Gina are the students. Next, Julie, you can be the teacher and finally, Gina can be the teacher."

15. Juan, a very active three-year-old, continually tries to climb the slick part of the slide in the activity room. He gets in the way of the other children when they try to use the slide the correct way. You have told him twice that if he wishes to slide, he can climb the ladder like the other children. What do you do now? As a caregiver, you say:

    A. "Juan, you have been told how to use the slide. Now come with me, and we will find something else for you to do."

    B. "Juan, you have one more chance to use the slide the right way. If you try to climb the slick side again, you will have to sit in the time-out chair."

    C. "Juan, you have been told not to try to climb this part of the slide. Now go find something else to play."

16. Darla, age four, has a great deal of trouble sitting next to any other child during storytime. Today, it was necessary to ask her to move several times because she continued to bother the children next to her. When Darla' mother left today, she said, "I want you to tell me how Darla does today, because I have told her she cannot be a bad girl when she comes to the center." When the mother returns, she asks, "Well, how was she?" As a caregiver, you say"

    A. "Darla was better today. I only had to move her a few times during storytime."

    B. "Darla had trouble sitting quietly today, but I am sure she will improve in the future. She seems to learn rapidly."

    C. "Darla is trying hard at the center. I am planning to tell her how well she does when she sits quietly at storytime."

17. Melvin, in the school-age room, often runs into things. Today, he has fallen from the slide. First Melvin cries and then he begins to complain about his arm hurting. You are wondering if Melvin's arm is broken or if he is play-acting. As a caregiver, you fill out an accident report and then:

    A. Wait until his parents arrive. At that time you explain to the parents what happened and request they take Melvin to the doctor for an X-ray.

    B. Ignore Melvin's complaints, but watch him closely. If Melvin moves his arm, you will know it is not broken.

    C. Take Melvin to the director. Then, the director can examine Melvin's arm and take the proper action.

18. Tommy is painting when the neighbor arrives to get him. The neighbor is in a hurry because her own children are about to arrive home from school. She says that she cannot wait for Tommy to finish his painting. As a caregiver, you:

    A. Tell Tommy he must leave now and can finish the painting tomorrow, or he may take it home to finish.

    B. Tell Tommy to find his coat and hat. Explain to him the neighbor's children will be coming home soon and he must hurry.

    C. Tell Tommy he can finish the painting. Then tell the neighbor it will take only a few minutes and her children will understand because they are older.

19. Donald's mother is late coming for him. He has been prepared to leave for some time, and now he keeps demanding, "Where is my mother? When is she coming?" As a caregiver, you:

    A. Tell Donald his mother will be here soon and he should find something to do until she arrives.

    B. Tell Donald his mother will be here shortly. Then help Donald busy himself with an easy-to-put-away activity until she arrives.

    C. Tell Donald he must learn to be patient, to sit down and wait until she arrives.

20. Terry, a four-year-old, is seated for snack time. Today you are serving popcorn and Terry begins to throw his at a friend. You explain to Terry that snacks are to eat, not to throw. When you turn your back Terry begins to throw the popcorn. As the caregiver, you say:

    A. "Terry, I will keep your popcorn for you until you can remember that popcorn is to eat, not to throw."

    B. "Terry, no more snacks for you. Go sit in the time-out chair until you can remember what snack time is for."

    C. "Terry, remember, I said not to throw the popcorn. Now stop it!"

OUR ANSWERS

Situation 1	A
Situation 2	B
Situation 3	B
Situation 4	A
Situation 5	C
Situation 6	A
Situation 7	A
Situation 8	A
Situation 9	B
Situation 10	C
Situation 11	B
Situation 12	A
Situation 13	A
Situation 14	B
Situation 15	A
Situation 16	C
Situation 17	C
Situation 18	A
Situation 19	B
Situation 20	A

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